**Instructions:** Please complete **both** pages, responding to all the questions as accurately as possible. If you are unsure of the answer to any question, please indicate so. School policy allows for the District to take disciplinary action against school staff who have knowledge/reasonable suspicion of a violation of the bullying policy and fail to report it.

**STAFF BULLYING REPORT FORM**

Hazen Public School

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Describe what happened/what is happening: |  | | | | | | |
| When did it happen? | Before school  During school  After school  Unsure | | | | Date:  Time:    am  pm | | |
| Where did it happen? | In the school building (list specific room):  On the school playground  In the school parking lot  On the school bus | | | | | Online  At a school event (list specific event):  Other (please specify):  Unsure | |
| Who was committing the bullying (if you’re unsure of the bully’s name(s) describe him/her? |  | | | | | | |
| Who was the victim of the bullying (if you’re unsure of his/her name, describe him/her)? |  | | | | | | |
| How did you learn of the incident? | Witnessed it  Received a report from the victim:  Oral  Written (attach)  Received a report from a bystander:  Oral  Written (attach)  Received a report from a community member:  Oral  Written (attach)  Received a report from the perpetrator: :  Oral  Written (attach)  Suspected bullying as a result of changes in a student’s behavior. | | | | | | |
| Did anyone else witness the bullying?  Yes, please list  No  Unsure | Please list names of witnesses and/or anyone that may have information about the incident. | | | | | | |
| Were students/others physically hurt (please explain)? | Yes, explain  No  Unsure | |  | | | | |
| Was there damage to anyone’s personal property? | Yes, describe  No  Unsure | |  | | | | |
| Have you noticed a change in the victim’s routine (e.g., attendance patterns changed, grades dropped, avoids certain locations in the school)? | Yes, explain  No  Unsure | |  | | | | |
| If the bullying occurred online is there evidence that it was/has caused: | A substantial disruption to the educational environment (e.g., staff prevented from carrying out duties, computer networks shut down, change in attendance patterns)  A true threat (a statement that, in light of the circumstances, a reasonable person would perceive as a serious expression of an intent to inflict harm)  Unsure  If applicable, explain: | | | | | | |
| In your view, was the incident motivated by any of the following traits (actual or perceived)? | Race  Color  Religion | Sex (includes sexual orientation)  Status with regard to marriage or public assistance  Disability (physical or mental) | | | | | National origin  N/a  Unsure |
| Was the incident an act of retaliation against an individual who filed a previous bullying report and/or participated in an investigation? | Yes  No  Unsure | | | Have you reported the incident to law enforcement?  Yes  No | | | |
| Your name: |  | | | | | | |
| Your school: |  | | | | | | |
| List your contact information: | Phone: Email: | | | | | | |

**Remember to hit “save” before closing this form**. Please print or email the form, **attach any relevant documentation that you may have**, and return it to the building administrator or his/her superior if the report implicates the building administrator. If the report implicates the Superintendent, return it to the Board President.